



Benzodiazepine-free Cardiac Anesthesia for Reduction of Postoperative Delirium (B-Free)

February 2020

Study question



Does an institutional policy of limited intraoperative benzodiazepine use reduce incidence of delirium after cardiac surgery?

Study Design



Cluster Crossover

- Hospital = cluster
- Hospitals are randomized to use one of the two policies for each of 12, 4-week crossover periods
- All patients undergoing cardiac surgery during the study period are included in the trial

Study Interventions



Limited Benzodiazepine Policy

- No routine administration of any benzodiazepines <u>during</u> cardiac surgery
- Accepted administration of benzodiazepines according to anesthesiologist discretion

 (Expected administration of benzodiazepines to 10% of patients)

Liberal Benzodiazepine Policy

- Administration of 0.03 mg/kg Midazolam equivalent <u>during</u> cardiac surgery
- Accepted avoidance of benzodiazepine administration according to anesthesiologist discretion
- (Expected avoidance of benzodiazepines to 10% of patients)

Study Outcomes



Primary Outcome

Incidence of delirium in CVICU

Secondary Outcomes

ICU LOS

Hospital LOS

In-hospital mortality